

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 3/14/05

2 Serial/Patent # 09/625,226

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other	13	1/11/05	\$ 665

7 TOTAL AMOUNT OF REFUND \$ CC

8 TO BE REFUNDED BY:

10 REASON:	Treasury Check
	Credit Deposit A/C #:
Duplicate Payment	9 <input type="text"/> -- <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

X No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: Sherry Brinkley TITLE: Ret Atty.

SIGNATURE: Sherry Brinkley PHONE: _____

OFFICE: USC of Pat. ****

THIS SPACE RESERVED FOR FINANCE USE ONLY: ****

APPROVED: Alicia Miller DATE: 3/14/05

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B